

B6F (Official Form 6F) (12/07)

In re **John E. Kehrer,  
Cynthia R. Kehrer**Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                        | C<br>O<br>D<br>E<br>B<br>T<br>O<br>R<br><br>H<br>U<br>S<br>B<br>A<br>N<br>D<br>W<br>I<br>F<br>E<br>J<br>O<br>I<br>N<br>T<br>C<br>O<br>M<br>M<br>U<br>N<br>I<br>T<br>Y | Husband, Wife, Joint, or Community | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM |
|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|-----------------|
| Account No. <b>xxxxx0261</b><br><br><b>A. Sheldon Gould Attorney At Law</b><br><b>PO Box 1169</b><br><b>Syracuse, NY 13218</b>       | <b>J</b>                                                                                                                                                              | <b>2005<br/>Collections</b>        |                                                |                                                          |                                      | <b>Unknown</b>  |
| Account No. <b>2737</b><br><br><b>Albert Tripodi MC, PLLC</b><br><b>1101 Erie Blvd. East Suite 201</b><br><b>Syracuse, NY 13210</b>  | <b>J</b>                                                                                                                                                              | <b>2009<br/>Collection</b>         |                                                |                                                          |                                      | <b>0.00</b>     |
| Account No. <b>xx4686</b><br><br><b>Anesthesia Group of Onondaga, PC</b><br><b>PO Box 347272</b><br><b>Pittsburgh, PA 15251-4272</b> | <b>J</b>                                                                                                                                                              | <b>2010<br/>Medical</b>            |                                                |                                                          |                                      | <b>100.00</b>   |
| Account No.<br><br><b>Bay Medical Center</b><br><b>PO Box 59515</b><br><b>Panama City, FL 32412</b>                                  | <b>J</b>                                                                                                                                                              | <b>2010<br/>medical</b>            |                                                |                                                          |                                      | <b>Unknown</b>  |
| Subtotal<br>(Total of this page)                                                                                                     |                                                                                                                                                                       |                                    |                                                |                                                          |                                      | <b>100.00</b>   |

21 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)    | C<br>O<br>D<br>E<br>B<br>O<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                          |
|------------------------------------------------------------------------------------------------------------------|---------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|------------------------------------------|
|                                                                                                                  |                                 | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                          |
| Account No.                                                                                                      |                                 | <b>20010<br/>medical</b>                                                                            |                                                |                                                          |                                      | <b>Unknown</b>                           |
| <b>Bay Medical ER Pjsicians<br/>PO Box 11407<br/>Birmingham, AL 36246</b>                                        | <b>J</b>                        |                                                                                                     |                                                |                                                          |                                      |                                          |
| Account No. <b>x</b>                                                                                             |                                 | <b>Business Debt</b>                                                                                |                                                |                                                          |                                      | <b>1,100.00</b>                          |
| <b>Brady Systems<br/>811 N. Alvord St.<br/>Syracuse, NY 13208</b>                                                | <b>W</b>                        |                                                                                                     |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxxxxxxxx7648</b>                                                                              |                                 | <b>Opened 10/04/06 Last Active 10/20/11<br/>Credit Card</b>                                         |                                                |                                                          |                                      | <b>0.00</b>                              |
| <b>Capital One<br/>Po Box 30253<br/>Salt Lake City, UT 84130</b>                                                 | <b>W</b>                        |                                                                                                     |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxxxxxxxx7309</b>                                                                              |                                 | <b>Opened 1/22/07 Last Active 11/01/11<br/>Credit Card</b>                                          |                                                |                                                          |                                      | <b>0.00</b>                              |
| <b>Capital One<br/>Attn: Bankruptcy<br/>Po Box 30285<br/>Salt Lake City, UT 84130</b>                            | <b>W</b>                        |                                                                                                     |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxxxx7920</b>                                                                                  |                                 | <b>Opened 11/01/01 Last Active 11/01/03</b>                                                         |                                                |                                                          |                                      | <b>0.00</b>                              |
| <b>Capital One Bank Usa<br/>Po Box 85015<br/>Richmond, VA 23285-5075</b>                                         | <b>W</b>                        |                                                                                                     |                                                |                                                          |                                      |                                          |
| Sheet no. <b>1</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims |                                 |                                                                                                     |                                                |                                                          |                                      | <b>Subtotal<br/>(Total of this page)</b> |
|                                                                                                                  |                                 |                                                                                                     |                                                |                                                          |                                      | <b>1,100.00</b>                          |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
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Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                       | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                                       |
|-------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|-------------------------------------------------------|
|                                                                                                                                     |                                      | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                                       |
| Account No. <b>x9608</b><br><br><b>Cardiology, P.C.</b><br><b>739 Irving Ave.</b><br><b>Suite 500</b><br><b>Syracuse, NY 13210</b>  | <b>J</b>                             | <b>2013</b><br><b>medical</b>                                                                       |                                                |                                                          |                                      | <b>537.00</b>                                         |
| Account No. <b>xxx-x4066</b><br><br><b>CBCS</b><br><b>Po Box 163729</b><br><b>Columbus, OH 43216-3729</b>                           | <b>J</b>                             | <b>2010</b><br><b>Collections</b>                                                                   |                                                |                                                          |                                      | <b>Unknown</b>                                        |
| Account No. <b>x4786</b><br><br><b>CGH ECG ECHO Group, LLP</b><br><b>1001 W. Fayette St., Ste. 400</b><br><b>Syracuse, NY 13204</b> | <b>J</b>                             | <b>8/10/2006</b><br><b>Medical</b>                                                                  |                                                |                                                          |                                      | <b>260.00</b>                                         |
| Account No. <b>xxxxx74Y1</b><br><br><b>Child Support Enforcem</b><br><b>Po Box 14</b><br><b>Albany, NY 12201</b>                    | <b>W</b>                             | <b>Opened 5/01/00 Last Active 2/13/06</b><br><b>Family Support</b>                                  |                                                |                                                          |                                      | <b>0.00</b>                                           |
| Account No. <b>xx-x2192</b><br><br><b>CIM EKG Group</b><br><b>PO Box 2003</b><br><b>East Syracuse, NY 13057</b>                     | <b>J</b>                             | <b>2012</b><br><b>medical</b>                                                                       |                                                |                                                          |                                      | <b>35.00</b>                                          |
| Sheet no. <b>2</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims                    |                                      |                                                                                                     |                                                |                                                          |                                      | <b>Subtotal</b><br>(Total of this page) <b>832.00</b> |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
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Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                        | C<br>O<br>D<br>E<br>B<br>O<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                          |
|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|------------------------------------------|
|                                                                                                                                      |                                 | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxxxxxxxxxxxx5390</b><br><br><b>Cmre Financial Services Inc<br/>3075 E Imperial Hwy Ste 200<br/>Brea, CA 92821</b> | <b>H</b>                        | <b>Opened 5/01/11<br/>Collection Attorney Anesthesia Grp.Of<br/>Onondaga Pc</b>                     |                                                |                                                          |                                      | <b>100.00</b>                            |
| Account No. <b>xx2312</b><br><br><b>CNY Anesthesia Group PC<br/>PO Box 2005<br/>East Syracuse, NY 13057</b>                          | <b>J</b>                        | <b>2012<br/>Medical</b>                                                                             |                                                |                                                          |                                      | <b>1,089.00</b>                          |
| Account No. <b>xxx5685</b><br><br><b>Collection Bur Ft Walt<br/>711 Eglin Pkwy E<br/>Fort Walton Beach, FL 32547</b>                 | <b>W</b>                        | <b>Opened 9/01/10 Last Active 12/06/11<br/>Collection Attorney Bay Emergency Physicians</b>         |                                                |                                                          |                                      | <b>465.00</b>                            |
| Account No. <b>xxx4254</b><br><br><b>Collection Bur Ft Walt<br/>711 Eglin Pkwy E<br/>Fort Walton Beach, FL 32547</b>                 | <b>W</b>                        | <b>Opened 12/01/10 Last Active 12/06/11<br/>Collection Attorney Bay Radiology Associates</b>        |                                                |                                                          |                                      | <b>33.00</b>                             |
| Account No. <b>x</b><br><br><b>Community General Hospital<br/>4900 Broad Road<br/>Syracuse, NY 13205</b>                             | <b>J</b>                        | <b>Medical</b>                                                                                      |                                                |                                                          |                                      | <b>Unknown</b>                           |
| Sheet no. <b>3</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims                     |                                 |                                                                                                     |                                                |                                                          |                                      | <b>Subtotal<br/>(Total of this page)</b> |
|                                                                                                                                      |                                 |                                                                                                     |                                                |                                                          |                                      | <b>1,687.00</b>                          |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
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Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)    | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM  |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|------------------|
|                                                                                                                  |                                      | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                  |
| Account No. <b>xxx7526</b>                                                                                       | <b>J</b>                             | <b>2006<br/>Medical</b>                                                                             |                                                |                                                          |                                      | <b>4,560.64</b>  |
| <b>Community General Hospital<br/>PO Box 2337<br/>Syracuse, NY 13220</b>                                         |                                      |                                                                                                     |                                                |                                                          |                                      |                  |
| Account No. <b>xxxxx3344</b>                                                                                     | <b>J</b>                             | <b>2011<br/>Medical</b>                                                                             |                                                |                                                          |                                      | <b>258.65</b>    |
| <b>Cortland Regional Medical Center<br/>PO Box 2010<br/>Cortland, NY 13045</b>                                   |                                      |                                                                                                     |                                                |                                                          |                                      |                  |
| Account No. <b>xxxxxxxxxxxx8977</b>                                                                              | <b>W</b>                             | <b>Opened 12/20/05 Last Active 11/01/11<br/>Credit Card</b>                                         |                                                |                                                          |                                      | <b>0.00</b>      |
| <b>Credit One Bank<br/>Po Box 98873<br/>Las Vegas, NV 89193</b>                                                  |                                      |                                                                                                     |                                                |                                                          |                                      |                  |
| Account No. <b>x6324</b>                                                                                         | <b>J</b>                             | <b>Medical</b>                                                                                      |                                                |                                                          |                                      | <b>47,500.00</b> |
| <b>Crouse Health<br/>736 Irving Ave.<br/>Syracuse, NY 13210</b>                                                  |                                      |                                                                                                     |                                                |                                                          |                                      |                  |
| Account No. <b>x1683</b>                                                                                         | <b>J</b>                             | <b>Medical</b>                                                                                      |                                                |                                                          |                                      | <b>27,069.00</b> |
| <b>Crouse Irving Memorial Hospital Inc.<br/>736 Irving Ave.<br/>Syracuse, NY 13210</b>                           |                                      |                                                                                                     |                                                |                                                          |                                      |                  |
| Sheet no. <u>4</u> of <u>21</u> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims |                                      |                                                                                                     | Subtotal<br>(Total of this page)               |                                                          |                                      | <b>79,388.29</b> |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
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Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                                                                          | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|------------------------------------------|
|                                                                                                                                                                                        |                                      | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                          |
| Account No. <b>x3112</b><br><br><b>Crouse Irving Memorial Hospital Inc.</b><br><b>736 Irving Ave.</b><br><b>Syracuse, NY 13210</b>                                                     | <b>J</b>                             | <b>Medical</b>                                                                                      |                                                |                                                          |                                      | <b>4,375.00</b>                          |
| Account No. <b>x9259</b><br><br><b>Crouse Professional Services</b><br><b>1001 West Fayette Street</b><br><b>Suite 400</b><br><b>Syracuse, NY 13204</b>                                | <b>J</b>                             | <b>2012<br/>medical</b>                                                                             |                                                |                                                          |                                      | <b>220.00</b>                            |
| Account No. <b>xx-x5601</b><br><br><b>Crouse Radiology Assoc.</b><br><b>PO Box 2004</b><br><b>East Syracuse, NY 13057</b>                                                              | <b>H</b>                             | <b>2006<br/>Medical</b>                                                                             |                                                |                                                          |                                      | <b>244.00</b>                            |
| Account No. <b>xxxxx6827</b><br><br><b>Dept. of Medical Service Group</b><br><b>Medine</b><br><b>PO Box 4848</b><br><b>C/O Medbest Medical Management</b><br><b>Syracuse, NY 13221</b> | <b>J</b>                             | <b>2012<br/>Medical</b>                                                                             |                                                |                                                          |                                      | <b>6,555.00</b>                          |
| Account No. <b>xxx9145</b><br><br><b>Dept. of Neurology Med Svc Grp</b><br><b>c/o Medbest Med Mgmt</b><br><b>PO Box 4738</b><br><b>Syracuse, NY 13221</b>                              | <b>J</b>                             | <b>2004<br/>Medical</b>                                                                             |                                                |                                                          |                                      | <b>Unknown</b>                           |
| Sheet no. <b>5</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims                                                                       |                                      |                                                                                                     |                                                |                                                          |                                      | <b>Subtotal<br/>(Total of this page)</b> |
|                                                                                                                                                                                        |                                      |                                                                                                     |                                                |                                                          |                                      | <b>11,394.00</b>                         |

B6F (Official Form 6F) (12/07) - Cont.

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Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                                                             | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|--------------------------------------------------------------|
|                                                                                                                                                                           |                                      | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                                              |
| Account No. <b>x</b><br><br><b>Dorothea Woodford</b><br><b>841 Bailey Rd.</b><br><b>Fabius, NY 13063</b>                                                                  | <b>W</b>                             | <b>Collections</b>                                                                                  |                                                |                                                          |                                      | <b>68,000.00</b>                                             |
| Account No. <b>7650</b><br><br><b>Gerald McMahon, MD</b><br><b>PO Box 2337</b><br><b>Syracuse, NY 13220</b>                                                               | <b>J</b>                             | <b>2011<br/>Medical</b>                                                                             |                                                |                                                          |                                      | <b>55.00</b>                                                 |
| Account No. <b>xxxx6800</b><br><br><b>Harvard Collection Services, Inc.</b><br><b>4839 N. Elston Avenue</b><br><b>Chicago, IL 60630</b>                                   | <b>J</b>                             | <b>2010<br/>Collections</b>                                                                         |                                                |                                                          |                                      | <b>Unknown</b>                                               |
| Account No. <b>xxxxxxxx0652</b><br><br><b>IndyMac Bank/OneWest Bank</b><br><b>Attn:Bankruptcy Department</b><br><b>2900 Esperanza Crossing</b><br><b>Austin, TX 78758</b> | <b>H</b>                             | <b>Opened 4/01/01 Last Active 5/31/13<br/>Real Estate Mortgage</b>                                  |                                                |                                                          |                                      | <b>Unknown</b>                                               |
| Account No. <b>xx3289</b><br><br><b>Joel N. Melnicoff</b><br><b>University Building Ste. 622</b><br><b>120 E. Washington St.</b><br><b>Syracuse, NY 13202</b>             | <b>J</b>                             | <b>2011<br/>Collections</b>                                                                         |                                                |                                                          |                                      | <b>Unknown</b>                                               |
| Sheet no. <b>6</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims                                                          |                                      |                                                                                                     |                                                |                                                          |                                      | <b>Subtotal<br/>(Total of this page)</b><br><b>68,055.00</b> |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
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Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                                                      | C<br>O<br>D<br>E<br>D<br>E<br>B<br>T<br>O<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|------------------------------------------|
|                                                                                                                                                                    |                                                | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxx0816</b><br><br><b>Kopp Collection Service Inc.</b><br><b>530 E. Genesee St., Ste. 20</b><br><b>PO Box 2367</b><br><b>Syracuse, NY 13220</b>  | <b>J</b>                                       | <b>2010<br/>Medical</b>                                                                             |                                                |                                                          |                                      | <b>Unknown</b>                           |
| Account No. <b>xxxxx4276</b><br><br><b>Laboratory Alliance of Central New<br/>York</b><br><b>1001 West Fayette St., Ste. 300</b><br><b>Syracuse, NY 13204-2866</b> | <b>J</b>                                       | <b>2004-2014<br/>Medical</b>                                                                        |                                                |                                                          |                                      | <b>1,893.75</b>                          |
| Account No. <b>xxxxx3473</b><br><br><b>Magnetic Diagnostic Resources of<br/>CNY</b><br><b>4567 Crossroads Park Drive</b><br><b>Liverpool, NY 13088</b>             | <b>J</b>                                       | <b>2012<br/>Medical</b>                                                                             |                                                |                                                          |                                      | <b>400.00</b>                            |
| Account No. <b>2737</b><br><br><b>Martin Noonan, MD</b><br><b>1101 Erie Blvd Suite 201</b><br><b>Syracuse, NY 13210</b>                                            | <b>J</b>                                       | <b>2010-2014<br/>Medical</b>                                                                        |                                                |                                                          |                                      | <b>3,534.00</b>                          |
| Account No. <b>xxxxxxxx9408</b><br><br><b>Merit Recovery Systems</b><br><b>6501 Basile Rowe Ste C</b><br><b>East Syracuse, NY 13057</b>                            | <b>H</b>                                       | <b>Opened 8/01/14<br/>Collection Attorney University Radiology<br/>Assoc.-lu</b>                    |                                                |                                                          |                                      | <b>Unknown</b>                           |
| Sheet no. <b>7</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims                                                   |                                                |                                                                                                     |                                                |                                                          |                                      | <b>Subtotal<br/>(Total of this page)</b> |
|                                                                                                                                                                    |                                                |                                                                                                     |                                                |                                                          |                                      | <b>5,827.75</b>                          |



B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)              | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                          |
|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|------------------------------------------|
|                                                                                                                            |                                      | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxxx3934</b><br><br><b>Merit Recovery Systems<br/>6501 Basile Rowe Ste C<br/>East Syracuse, NY 13057</b> | <b>H</b>                             | <b>Opened 11/01/13<br/>Collection Attorney Crouse Hospital<br/>Physicians</b>                       |                                                |                                                          |                                      | <b>537.00</b>                            |
| Account No. <b>xxxxxxx6752</b><br><br><b>Merit Recovery Systems<br/>6501 Basile Rowe Ste C<br/>East Syracuse, NY 13057</b> | <b>H</b>                             | <b>Opened 9/01/11<br/>Collection Attorney Crouse Hospital</b>                                       |                                                |                                                          |                                      | <b>816.00</b>                            |
| Account No. <b>xxxxxxx9783</b><br><br><b>Merit Recovery Systems<br/>6501 Basile Rowe Ste C<br/>East Syracuse, NY 13057</b> | <b>H</b>                             | <b>Opened 3/01/12<br/>Collection Attorney Crouse Hospital<br/>Physicians</b>                        |                                                |                                                          |                                      | <b>604.00</b>                            |
| Account No. <b>xxxxxxx8931</b><br><br><b>Merit Recovery Systems<br/>6501 Basile Rowe Ste C<br/>East Syracuse, NY 13057</b> | <b>H</b>                             | <b>Opened 2/01/13<br/>Collection Attorney Crouse Hospital<br/>Physicians</b>                        |                                                |                                                          |                                      | <b>220.00</b>                            |
| Account No. <b>xxxxxxx9628</b><br><br><b>Merit Recovery Systems<br/>6501 Basile Rowe Ste C<br/>East Syracuse, NY 13057</b> | <b>H</b>                             | <b>Opened 2/01/11<br/>Collection Attorney Crouse Hospital<br/>Physicians</b>                        |                                                |                                                          |                                      | <b>463.00</b>                            |
| Sheet no. <b>8</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims           |                                      |                                                                                                     |                                                |                                                          |                                      | <b>Subtotal<br/>(Total of this page)</b> |
|                                                                                                                            |                                      |                                                                                                     |                                                |                                                          |                                      | <b>2,640.00</b>                          |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                                              | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|---------------------------------------------------------|
|                                                                                                                                                            |                                      | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                                         |
| Account No. <b>xxxxxxx4632</b><br><br><b>Merit Recovery Systems</b><br><b>6501 Basile Rowe Ste C</b><br><b>East Syracuse, NY 13057</b>                     | <b>H</b>                             | <b>Opened 2/01/10</b><br><b>Collection Attorney Crouse Hospital</b><br><b>Physicians</b>            |                                                |                                                          |                                      | <b>646.00</b>                                           |
| Account No. <b>xxxxxx5209</b><br><br><b>National Grid</b><br><b>Miscellaneous Billing Dept.</b><br><b>300 Erie Blvd. West</b><br><b>Syracuse, NY 13202</b> | <b>H</b>                             | <b>Opened 12/01/98 Last Active 2/01/15</b><br><b>Consolidation</b>                                  |                                                |                                                          |                                      | <b>256.00</b>                                           |
| Account No. <b>xxxx-x8237</b><br><br><b>Newman &amp; Lickstein</b><br><b>235 E. Water St.</b><br><b>Syracuse, NY 13202</b>                                 | <b>H</b>                             | <b>2007</b><br><b>Collections</b>                                                                   |                                                |                                                          |                                      | <b>Unknown</b>                                          |
| Account No. <b>xxxxxx0522</b><br><br><b>Onohealthcre</b><br><b>447 E Washington S</b><br><b>Syracuse, NY 13202</b>                                         | <b>H</b>                             | <b>Medical</b>                                                                                      |                                                |                                                          |                                      | <b>231.00</b>                                           |
| Account No. <b>xxxxxx0486</b><br><br><b>Onohealthcre</b><br><b>447 E Washington S</b><br><b>Syracuse, NY 13202</b>                                         | <b>H</b>                             | <b>Medical</b>                                                                                      |                                                |                                                          |                                      | <b>183.00</b>                                           |
| Sheet no. <b>9</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims                                           |                                      |                                                                                                     |                                                |                                                          |                                      | <b>Subtotal</b><br>(Total of this page) <b>1,316.00</b> |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                                            | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|------------------------------------------|
|                                                                                                                                                          |                                      | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxx0334</b><br><br><b>Onohealthcre</b><br><b>447 E Washington S</b><br><b>Syracuse, NY 13202</b>                                       | <b>H</b>                             | <b>Medical</b>                                                                                      |                                                |                                                          |                                      | <b>119.00</b>                            |
| Account No. <b>xxxxx0334</b><br><br><b>Onondaga Healthcare Recoveries</b><br><b>447 East Washington Street</b><br><b>Syracuse, NY 13202</b>              | <b>J</b>                             | <b>2009<br/>Collections</b>                                                                         |                                                |                                                          |                                      | <b>Unknown</b>                           |
| Account No. <b>xxxx0763</b><br><br><b>Overton, Russel, Doerr &amp; Donovan,<br/>LLP</b><br><b>PO Box 437</b><br><b>Clifton Park, NY 12065-0437</b>       | <b>J</b>                             | <b>2004<br/>Collections</b>                                                                         |                                                |                                                          |                                      | <b>Unknown</b>                           |
| Account No. <b>xxxxxxxx3643</b><br><br><b>Pathology Outreach PC</b><br><b>PO Box 35370</b><br><b>Syracuse, NY 13235-0370</b>                             | <b>J</b>                             | <b>2004<br/>Medical</b>                                                                             |                                                |                                                          |                                      | <b>50.42</b>                             |
| Account No. <b>xx4426</b><br><br><b>Plastic Reconstructive &amp; Hand<br/>Surgery</b><br><b>6221 State Route 31, Ste. 104</b><br><b>Cicero, NY 13039</b> | <b>J</b>                             | <b>2013<br/>Medical</b>                                                                             |                                                |                                                          |                                      | <b>2,164.00</b>                          |
| Sheet no. <b>10</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims                                        |                                      |                                                                                                     |                                                |                                                          |                                      | <b>Subtotal<br/>(Total of this page)</b> |
|                                                                                                                                                          |                                      |                                                                                                     |                                                |                                                          |                                      | <b>2,333.42</b>                          |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                        | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                          |
|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|------------------------------------------|
|                                                                                                                                      |                                      | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                          |
| Account No. <b>xxxxxxxxxxxxxxxx7648</b><br><br><b>Portfolio Recovery<br/>Attn: Bankruptcy<br/>Po Box 41067<br/>Norfolk, VA 23541</b> | <b>W</b>                             | <b>Opened 4/01/13 Last Active 9/22/14<br/>Factoring Company Account Capital One Na</b>              |                                                |                                                          |                                      | <b>0.00</b>                              |
| Account No. <b>xxxxx9759</b><br><br><b>Prospect Hill Radiology Group<br/>4567 Crossroads Park Drive<br/>Liverpool, NY 13088-3590</b> | <b>J</b>                             | <b>2011<br/>Medical</b>                                                                             |                                                |                                                          |                                      | <b>2,388.00</b>                          |
| Account No. <b>xxxx3452</b><br><br><b>Radiologic Group Services, MD<br/>4567 Crossroads PK Dr.<br/>Liverpool, NY 13088</b>           | <b>J</b>                             | <b>2004<br/>Meidcal</b>                                                                             |                                                |                                                          |                                      | <b>22.00</b>                             |
| Account No. <b>x5-339</b><br><br><b>RAS Boriskin LLC<br/>900 Merchants Concourse, Ste. LL-13<br/>Westbury, NY 11590</b>              | <b>J</b>                             | <b>2015<br/>Collections</b>                                                                         |                                                |                                                          |                                      | <b>Unknown</b>                           |
| Account No. <b>xx-6324</b><br><br><b>Robert P. Rothman, P.C.<br/>120 East Washington Street<br/>Suite 107<br/>Syracuse, NY 13202</b> | <b>J</b>                             | <b>2013<br/>Collections</b>                                                                         |                                                |                                                          |                                      | <b>Unknown</b>                           |
| Sheet no. <b>11</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims                    |                                      |                                                                                                     |                                                |                                                          |                                      | <b>Subtotal<br/>(Total of this page)</b> |
|                                                                                                                                      |                                      |                                                                                                     |                                                |                                                          |                                      | <b>2,410.00</b>                          |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)         | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community                                                                    | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM |
|-----------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|-----------------|
|                                                                                                                       |                                      | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE.   |                                                |                                                          |                                      |                 |
| Account No. <b>xx2124</b><br><br><b>Romeo &amp; Romeo</b><br><b>314 E. Fayette St.</b><br><b>Syracuse, NY 13202</b>   | <b>J</b>                             | <b>2007<br/>Legal</b>                                                                                 |                                                |                                                          |                                      | <b>Unknown</b>  |
| Account No. <b>xx0352</b><br><br><b>Simons Agency Inc</b><br><b>4963 Wintersweet Dr</b><br><b>Liverpool, NY 13088</b> | <b>H</b>                             | <b>Opened 4/01/13 Last Active 11/01/12<br/>Collection Attorney Department Of Medicine /</b>           |                                                |                                                          |                                      | <b>Unknown</b>  |
| Account No. <b>xx2289</b><br><br><b>Simons Agency Inc</b><br><b>4963 Wintersweet Dr</b><br><b>Liverpool, NY 13088</b> | <b>H</b>                             | <b>Opened 1/01/13 Last Active 11/01/12<br/>Collection Attorney Laboratory Alliance Of<br/>Central</b> |                                                |                                                          |                                      | <b>Unknown</b>  |
| Account No. <b>xx0356</b><br><br><b>Simons Agency Inc</b><br><b>4963 Wintersweet Dr</b><br><b>Liverpool, NY 13088</b> | <b>H</b>                             | <b>Opened 4/01/13 Last Active 11/01/12<br/>Collection Attorney Department Of Medicine /</b>           |                                                |                                                          |                                      | <b>Unknown</b>  |
| Account No. <b>xx0355</b><br><br><b>Simons Agency Inc</b><br><b>4963 Wintersweet Dr</b><br><b>Liverpool, NY 13088</b> | <b>H</b>                             | <b>Opened 4/01/13 Last Active 11/01/12<br/>Collection Attorney Department Of Medicine /</b>           |                                                |                                                          |                                      | <b>Unknown</b>  |
| Sheet no. <b>12</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims     |                                      |                                                                                                       |                                                |                                                          |                                      | <b>0.00</b>     |
| Subtotal<br>(Total of this page)                                                                                      |                                      |                                                                                                       |                                                |                                                          |                                      | <b>0.00</b>     |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)  | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | H<br>W<br>J<br>C | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                  |
|----------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|----------------------------------|
|                                                                                                                |                                      |                  | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                  |
| Account No. <b>xx1841</b>                                                                                      |                                      | H                | Opened 8/01/13 Last Active 2/01/13<br>Collection Attorney Laboratory Alliance Of<br>Central         |                                                |                                                          |                                      | Unknown                          |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                                  |
| Account No. <b>xx1853</b>                                                                                      |                                      | H                | Opened 8/01/13 Last Active 2/01/13<br>Collection Attorney Laboratory Alliance Of<br>Central         |                                                |                                                          |                                      | Unknown                          |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                                  |
| Account No. <b>xx1855</b>                                                                                      |                                      | H                | Opened 8/01/13 Last Active 2/01/13<br>Collection Attorney Laboratory Alliance Of<br>Central         |                                                |                                                          |                                      | Unknown                          |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                                  |
| Account No. <b>xx1846</b>                                                                                      |                                      | H                | Opened 8/01/13 Last Active 2/01/13<br>Collection Attorney Laboratory Alliance Of<br>Central         |                                                |                                                          |                                      | Unknown                          |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                                  |
| Account No. <b>xx1839</b>                                                                                      |                                      | H                | Opened 8/01/13 Last Active 1/01/13<br>Collection Attorney Laboratory Alliance Of<br>Central         |                                                |                                                          |                                      | Unknown                          |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                                  |
| Sheet no. <u>13</u> of <u>21</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |                                      |                  |                                                                                                     |                                                |                                                          |                                      | Subtotal<br>(Total of this page) |
|                                                                                                                |                                      |                  |                                                                                                     |                                                |                                                          |                                      | 0.00                             |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)     | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | H<br>W<br>J<br>C | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM |
|-------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|-----------------|
|                                                                                                                   |                                      |                  | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                 |
| Account No. <b>xx0357</b>                                                                                         |                                      | H                | Opened 4/01/13 Last Active 11/01/12<br>Collection Attorney Department Of Medicine /                 |                                                |                                                          |                                      | Unknown         |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                   |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                 |
| Account No. <b>xx1847</b>                                                                                         |                                      | H                | Opened 8/01/13 Last Active 1/01/13<br>Collection Attorney Laboratory Alliance Of<br>Central         |                                                |                                                          |                                      | Unknown         |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                   |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                 |
| Account No. <b>xx0353</b>                                                                                         |                                      | H                | Opened 4/01/13 Last Active 11/01/12<br>Collection Attorney Department Of Medicine /                 |                                                |                                                          |                                      | Unknown         |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                   |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                 |
| Account No. <b>xx1842</b>                                                                                         |                                      | H                | Opened 8/01/13 Last Active 2/01/13<br>Collection Attorney Laboratory Alliance Of<br>Central         |                                                |                                                          |                                      | Unknown         |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                   |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                 |
| Account No. <b>xx1848</b>                                                                                         |                                      | H                | Opened 8/01/13 Last Active 1/01/13<br>Collection Attorney Laboratory Alliance Of<br>Central         |                                                |                                                          |                                      | Unknown         |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                   |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                 |
| Sheet no. <u>14</u> of <u>21</u> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims |                                      |                  |                                                                                                     | Subtotal<br>(Total of this page)               |                                                          |                                      | 0.00            |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)     | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community                                                                    | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM |
|-------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|-----------------|
|                                                                                                                   |                                      | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE.   |                                                |                                                          |                                      |                 |
| Account No. <b>xx0354</b><br><br><b>Simons Agency Inc<br/>4963 Wintersweet Dr<br/>Liverpool, NY 13088</b>         | <b>H</b>                             | <b>Opened 4/01/13 Last Active 11/01/12<br/>Collection Attorney Department Of Medicine /</b>           |                                                |                                                          |                                      | <b>Unknown</b>  |
| Account No. <b>xx1840</b><br><br><b>Simons Agency Inc<br/>4963 Wintersweet Dr<br/>Liverpool, NY 13088</b>         | <b>H</b>                             | <b>Opened 8/01/13 Last Active 1/01/13<br/>Collection Attorney Laboratory Alliance Of<br/>Central</b>  |                                                |                                                          |                                      | <b>Unknown</b>  |
| Account No. <b>xx1849</b><br><br><b>Simons Agency Inc<br/>4963 Wintersweet Dr<br/>Liverpool, NY 13088</b>         | <b>H</b>                             | <b>Opened 8/01/13 Last Active 2/01/13<br/>Collection Attorney Laboratory Alliance Of<br/>Central</b>  |                                                |                                                          |                                      | <b>Unknown</b>  |
| Account No. <b>xx1850</b><br><br><b>Simons Agency Inc<br/>4963 Wintersweet Dr<br/>Liverpool, NY 13088</b>         | <b>H</b>                             | <b>Opened 8/01/13 Last Active 2/01/13<br/>Collection Attorney Laboratory Alliance Of<br/>Central</b>  |                                                |                                                          |                                      | <b>Unknown</b>  |
| Account No. <b>xx8892</b><br><br><b>Simons Agency Inc<br/>4963 Wintersweet Dr<br/>Liverpool, NY 13088</b>         | <b>H</b>                             | <b>Opened 12/01/13 Last Active 7/01/13<br/>Collection Attorney Laboratory Alliance Of<br/>Central</b> |                                                |                                                          |                                      | <b>Unknown</b>  |
| Sheet no. <b>15</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims |                                      |                                                                                                       |                                                |                                                          |                                      | <b>0.00</b>     |
| Subtotal<br>(Total of this page)                                                                                  |                                      |                                                                                                       |                                                |                                                          |                                      | <b>0.00</b>     |



B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)  | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | H<br>W<br>J<br>C | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                  |      |
|----------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|----------------------------------|------|
|                                                                                                                |                                      |                  | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                  |      |
| Account No. <b>xx8891</b>                                                                                      |                                      | H                | Opened 12/01/13 Last Active 6/01/13<br>Collection Attorney Laboratory Alliance Of<br>Central        |                                                |                                                          |                                      | Unknown                          |      |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                                  |      |
| Account No. <b>xx1831</b>                                                                                      |                                      | H                | Opened 4/01/14 Last Active 11/01/13<br>Collection Attorney Laboratory Alliance Of<br>Central        |                                                |                                                          |                                      | Unknown                          |      |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                                  |      |
| Account No. <b>xx4827</b>                                                                                      |                                      | H                | Opened 6/01/14 Last Active 1/01/14<br>Collection Attorney Laboratory Alliance Of<br>Central         |                                                |                                                          |                                      | Unknown                          |      |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                                  |      |
| Account No. <b>xx9550</b>                                                                                      |                                      | H                | Opened 7/01/14 Last Active 2/01/14<br>Collection Attorney Laboratory Alliance Of<br>Central         |                                                |                                                          |                                      | Unknown                          |      |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                                  |      |
| Account No. <b>xx1724</b>                                                                                      |                                      | H                | Opened 7/01/14 Last Active 2/01/14<br>Collection Attorney Upstate Emergency<br>Medicine /           |                                                |                                                          |                                      | Unknown                          |      |
| Simons Agency Inc<br>4963 Wintersweet Dr<br>Liverpool, NY 13088                                                |                                      |                  |                                                                                                     |                                                |                                                          |                                      |                                  |      |
| Sheet no. <u>16</u> of <u>21</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |                                      |                  |                                                                                                     |                                                |                                                          |                                      | Subtotal<br>(Total of this page) | 0.00 |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)  | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | H<br>W<br>J<br>C | Husband, Wife, Joint, or Community                                                                    | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                          |                 |
|----------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------|-------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|------------------------------------------|-----------------|
|                                                                                                                |                                      |                  | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE.   |                                                |                                                          |                                      |                                          |                 |
| Account No. <b>xx9341</b>                                                                                      |                                      | <b>H</b>         | <b>Opened 9/01/14 Last Active 3/01/14<br/>Collection Attorney Laboratory Alliance Of<br/>Central</b>  |                                                |                                                          |                                      | <b>Unknown</b>                           |                 |
| <b>Simons Agency Inc<br/>4963 Wintersweet Dr<br/>Liverpool, NY 13088</b>                                       |                                      |                  |                                                                                                       |                                                |                                                          |                                      |                                          |                 |
| Account No. <b>xx2386</b>                                                                                      |                                      | <b>H</b>         | <b>Opened 11/01/14 Last Active 6/01/14<br/>Collection Attorney Laboratory Alliance Of<br/>Central</b> |                                                |                                                          |                                      | <b>Unknown</b>                           |                 |
| <b>Simons Agency Inc<br/>4963 Wintersweet Dr<br/>Liverpool, NY 13088</b>                                       |                                      |                  |                                                                                                       |                                                |                                                          |                                      |                                          |                 |
| Account No. <b>xx3873</b>                                                                                      |                                      | <b>H</b>         | <b>Opened 2/01/13 Last Active 11/01/12<br/>Collection Attorney Laboratory Alliance Of<br/>Central</b> |                                                |                                                          |                                      | <b>Unknown</b>                           |                 |
| <b>Simons Agency Inc<br/>4963 Wintersweet Dr<br/>Liverpool, NY 13088</b>                                       |                                      |                  |                                                                                                       |                                                |                                                          |                                      |                                          |                 |
| Account No. <b>xx6616</b>                                                                                      |                                      | <b>H</b>         | <b>Opened 4/01/13 Last Active 11/01/12<br/>Collection Attorney Laboratory Alliance Of<br/>Central</b> |                                                |                                                          |                                      | <b>Unknown</b>                           |                 |
| <b>Simons Agency Inc<br/>4963 Wintersweet Dr<br/>Liverpool, NY 13088</b>                                       |                                      |                  |                                                                                                       |                                                |                                                          |                                      |                                          |                 |
| Account No. <b>xxxxxx0815</b>                                                                                  |                                      | <b>J</b>         | <b>2011<br/>Medical</b>                                                                               |                                                |                                                          |                                      | <b>5,564.36</b>                          |                 |
| <b>St. Joseph's Hospital Health Center<br/>PO Box 2337<br/>Syracuse, NY 13220</b>                              |                                      |                  |                                                                                                       |                                                |                                                          |                                      |                                          |                 |
| Sheet no. <u>17</u> of <u>21</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |                                      |                  |                                                                                                       |                                                |                                                          |                                      | <b>Subtotal<br/>(Total of this page)</b> | <b>5,564.36</b> |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)                               | C<br>O<br>D<br>E<br>B<br>T<br>O<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                          |
|---------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|------------------------------------------|
|                                                                                                                                             |                                      | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                          |
| Account No. <b>xxx3433</b><br><br><b>St. Joseph's Imaging Associates</b><br><b>4567 Crossroads Park Drive</b><br><b>Liverpool, NY 13088</b> | <b>J</b>                             | <b>2011<br/>Medical</b>                                                                             |                                                |                                                          |                                      | <b>221.00</b>                            |
| Account No. <b>xxxxx06N1</b><br><br><b>Stellar Coll</b><br><b>P.o. Box 6960</b><br><b>Syracuse, NY 13217</b>                                | <b>J</b>                             | <b>Opened 6/01/12 Last Active 5/01/12<br/>Medical Debt Medical</b>                                  |                                                |                                                          |                                      | <b>224.00</b>                            |
| Account No. <b>xxxxx36N1</b><br><br><b>Stellar Coll</b><br><b>P.o. Box 6960</b><br><b>Syracuse, NY 13217</b>                                | <b>J</b>                             | <b>Opened 2/01/12 Last Active 7/01/11<br/>Medical Debt Medical</b>                                  |                                                |                                                          |                                      | <b>252.00</b>                            |
| Account No. <b>xxxxx97N1</b><br><br><b>Stellar Coll</b><br><b>P.o. Box 6960</b><br><b>Syracuse, NY 13217</b>                                | <b>J</b>                             | <b>Opened 1/01/12 Last Active 12/01/11<br/>Medical Debt Medical</b>                                 |                                                |                                                          |                                      | <b>122.00</b>                            |
| Account No. <b>xxxxx86N1</b><br><br><b>Stellar Coll</b><br><b>P.o. Box 6960</b><br><b>Syracuse, NY 13217</b>                                | <b>J</b>                             | <b>Opened 2/01/12 Last Active 4/01/11<br/>Medical Debt Medical</b>                                  |                                                |                                                          |                                      | <b>404.00</b>                            |
| Sheet no. <b>18</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims                           |                                      |                                                                                                     |                                                |                                                          |                                      | <b>Subtotal<br/>(Total of this page)</b> |
|                                                                                                                                             |                                      |                                                                                                     |                                                |                                                          |                                      | <b>1,223.00</b>                          |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)     | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community                                                                  | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM                                       |
|-------------------------------------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|-------------------------------------------------------|
|                                                                                                                   |                                      | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |                                                |                                                          |                                      |                                                       |
| Account No. <b>xxxxx38N1</b><br><br><b>Stellar Coll</b><br><b>P.o. Box 6960</b><br><b>Syracuse, NY 13217</b>      | <b>J</b>                             | <b>Opened 1/01/12 Last Active 7/01/11</b><br><b>Medical Debt Medical</b>                            |                                                |                                                          |                                      | <b>252.00</b>                                         |
| Account No. <b>xxxxx08N1</b><br><br><b>Stellar Coll</b><br><b>P.o. Box 6960</b><br><b>Syracuse, NY 13217</b>      | <b>J</b>                             | <b>Opened 11/01/11 Last Active 10/01/11</b><br><b>Medical Debt Medical</b>                          |                                                |                                                          |                                      | <b>106.00</b>                                         |
| Account No. <b>xxxxx15N1</b><br><br><b>Stellar Coll</b><br><b>P.o. Box 6960</b><br><b>Syracuse, NY 13217</b>      | <b>J</b>                             | <b>Opened 2/01/11 Last Active 11/01/10</b><br><b>Medical Debt Medical</b>                           |                                                |                                                          |                                      | <b>112.00</b>                                         |
| Account No. <b>xxxxx40N1</b><br><br><b>Stellar Coll</b><br><b>P.o. Box 6960</b><br><b>Syracuse, NY 13217</b>      | <b>J</b>                             | <b>Medical</b>                                                                                      |                                                |                                                          |                                      | <b>130.00</b>                                         |
| Account No. <b>xxxxx57N1</b><br><br><b>Stellar Coll</b><br><b>P.o. Box 6960</b><br><b>Syracuse, NY 13217</b>      | <b>J</b>                             | <b>Opened 9/01/10 Last Active 5/01/10</b><br><b>Medical Debt Medical</b>                            |                                                |                                                          |                                      | <b>120.00</b>                                         |
| Sheet no. <b>19</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims |                                      |                                                                                                     |                                                |                                                          |                                      | <b>Subtotal</b><br>(Total of this page) <b>720.00</b> |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrer,  
Cynthia R. Kehrer**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)   | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community                                                    | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM  |
|-----------------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|------------------|
|                                                                                                                 |                                      | H<br>W<br>J<br>C                                                                      |                                                |                                                          |                                      |                  |
| Account No. <b>xxxxx29N1</b>                                                                                    | <b>J</b>                             | <b>Medical</b>                                                                        |                                                |                                                          |                                      | <b>167.00</b>    |
| <b>Stellar Coll<br/>P.o. Box 6960<br/>Syracuse, NY 13217</b>                                                    |                                      |                                                                                       |                                                |                                                          |                                      |                  |
| Account No. <b>xxxxx50N1</b>                                                                                    | <b>J</b>                             | <b>Opened 9/01/12 Last Active 5/01/12<br/>Collection Attorney Lab Alliance Of Cny</b> |                                                |                                                          |                                      | <b>224.00</b>    |
| <b>Stellar Collection Ser<br/>4567 Crossroads Park Dr<br/>Liverpool, NY 13088</b>                               |                                      |                                                                                       |                                                |                                                          |                                      |                  |
| Account No. <b>xx-5162</b>                                                                                      | <b>J</b>                             | <b>2005<br/>Judgment Medical</b>                                                      |                                                |                                                          |                                      | <b>74,203.71</b> |
| <b>SUNY Upstate Medical University<br/>Hospital<br/>750 East Adams Street<br/>Syracuse, NY 13210</b>            |                                      |                                                                                       |                                                |                                                          |                                      |                  |
| Account No. <b>xxxx0326</b>                                                                                     | <b>J</b>                             | <b>2011<br/>Medical</b>                                                               |                                                |                                                          |                                      | <b>2,100.00</b>  |
| <b>Syracuse Orthopedic Specialists<br/>Attn: Brenda Paiz<br/>5824 Widewaters Parkway<br/>Syracuse, NY 13214</b> |                                      |                                                                                       |                                                |                                                          |                                      |                  |
| Account No. <b>xx9145</b>                                                                                       | <b>J</b>                             | <b>2004-2014<br/>Medical</b>                                                          |                                                |                                                          |                                      | <b>993.00</b>    |
| <b>University Radiology Assoc.<br/>60 Presidential Plz., Ste. 207<br/>Syracuse, NY 13202-2243</b>               |                                      |                                                                                       |                                                |                                                          |                                      |                  |
| Sheet no. <u>20</u> of <u>21</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims  |                                      |                                                                                       | Subtotal<br>(Total of this page)               |                                                          |                                      | <b>77,687.71</b> |

B6F (Official Form 6F) (12/07) - Cont.

In re **John E. Kehrler,  
Cynthia R. Kehrler**

Case No. **15-30502-5**

Debtors

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)     | C<br>O<br>D<br>E<br>B<br>O<br>R<br>R | Husband, Wife, Joint, or Community | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM   |
|-------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------|------------------------------------------------|----------------------------------------------------------|--------------------------------------|-------------------|
|                                                                                                                   |                                      | H<br>W<br>J<br>C                   |                                                |                                                          |                                      |                   |
| Account No. <b>xx2304</b>                                                                                         |                                      |                                    |                                                |                                                          |                                      |                   |
| <b>University Surgical Associates<br/>c/o MedBest Med Mgmt<br/>PO Box 4738<br/>Syracuse, NY 13221-4738</b>        | <b>J</b>                             | <b>2010<br/>Medical</b>            |                                                |                                                          |                                      | <b>383.00</b>     |
| Account No.                                                                                                       |                                      |                                    |                                                |                                                          |                                      |                   |
|                                                                                                                   |                                      |                                    |                                                |                                                          |                                      |                   |
| Account No.                                                                                                       |                                      |                                    |                                                |                                                          |                                      |                   |
|                                                                                                                   |                                      |                                    |                                                |                                                          |                                      |                   |
| Account No.                                                                                                       |                                      |                                    |                                                |                                                          |                                      |                   |
|                                                                                                                   |                                      |                                    |                                                |                                                          |                                      |                   |
| Account No.                                                                                                       |                                      |                                    |                                                |                                                          |                                      |                   |
|                                                                                                                   |                                      |                                    |                                                |                                                          |                                      |                   |
| Sheet no. <b>21</b> of <b>21</b> sheets attached to Schedule of<br>Creditors Holding Unsecured Nonpriority Claims |                                      |                                    |                                                |                                                          |                                      | <b>383.00</b>     |
| Subtotal<br>(Total of this page)                                                                                  |                                      |                                    |                                                |                                                          |                                      |                   |
| Total<br>(Report on Summary of Schedules)                                                                         |                                      |                                    |                                                |                                                          |                                      | <b>262,661.53</b> |